



PATENT
Attorney Docket No. 6374

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Barron, et al.

Serial No.: 09/788,308

Group No.: 1646

Filed: 2/16/01

Examiner:

For: POLYPEPTOID PULMONARY SURFACTANTS

Commissioner of Patents and Trademarks
Washington, D.C. 20231
Attention Application Division

STATEMENT BY ATTORNEY THAT APPLICATION BEING FILED IN PTO IS THE ONE
INVENTOR EXECUTED BY SIGNING DECLARATION

NOTE: This form is to be used when the declaration only indicates the name(s) of the inventor(s) and the title of the invention. Notice of September 12, 1983, 1035 O.G. 3.

I, Rodney D. DeKruif
Name of Attorney
Reinhart, Boerner, Van Deuren, Norris & Rieselbach, s.c.,
1000 North Water Street, P.O. Box 92900, Milwaukee, Wisconsin 53202-0900
Reg. No. 35,853 Tel. No. (414) 298-8360

state I am the attorney for this application and the application identified above is the application which the inventor(s) executed by signing the declaration which is being submitted herewith.

Rodney D. DeKruif
Signature of Attorney

****FOR DIVISIONAL APPLICATIONS****

****The application is being filed pursuant to Section 1.60. A true copy is enclosed of the prior complete application as filed in the parent application _____ including the specification (with claims), drawings, oath or declaration showing the signature or an indication it was signed, and any amendments referred to in the oath or declaration filed to complete the prior application. No amendments referred to in the oath or declaration filed to complete the prior application introduced new matter therein.**

Certificate of Mailing/Transmission (37 CFR 1.8)

I hereby certify that this correspondence is, on the date shown below, being:

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Date: May 21, 2001

Rodney D. DeKruif
Signature
Rodney D. DeKruif
(type or print name of person certifying)



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PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	6374
	First Named Inventor	Barron, Annelise E.
	COMPLETE IF KNOWN	
	Application Number	09/788,308
<input type="checkbox"/> Declaration Submitted with Initial Filing	Filing Date	02/16/2001
	Group Art Unit	1646
	Examiner Name	
<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

POLYPEPTOID PULMONARY SURFACTANTS

the specification of which
☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **02/16/2001** as United States Application Number or PCT International Application Number **09/788,308** and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)
60/182,847	02/16/2000

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number **22922** OR



22922

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Rodney D. DeKruif	35,853		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label



22922

OR ☐ Correspondence address below

Name	Rodney D. DeKruif, Esq. Reinhart, Boerner, Van Deuren, Norris & Rieselbach, s.c.					
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Address	Suite 2100					
City	Milwaukee	State	WI	ZIP	53202	
Country	United States	Telephone	414-298-8360		Fax	414-298-8097

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Annelise E.		Barron	
Inventor's Signature			Date
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Post Office Address			
City	Chicago	State	IL
ZIP	60626	Country	US

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
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Country	US	Citizenship	US
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ZIP	94530	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Cindy W.		Wu	
Inventor's Signature <i>Cindy W. Wu</i>		Date <i>5/21/2001</i>	
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Mailing Address			
City	Evanston	State	IL
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

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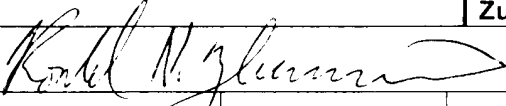
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DECLARATION**ADDITIONAL INVENTOR(S)****Supplemental Sheet**Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ronald N.		Zuckermann	
Inventor's Signature 		Date 5/14/01	
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Mailing Address			
City	El Cerrito	State	CA
ZIP	94530	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Cindy W.		Wu	
Inventor's Signature		Date	
Residence: City	Evanston	State	IL
Country	US	Citizenship	US
Mailing Address 1724 Madison Street			
Mailing Address			
City	Evanston	State	IL
ZIP	60202	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

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